# Recertification Report - CARF Accredited Organization

Provider Name			Provider Number	Begin Cert Date	End Cert Date
BRIDGES HABILITATION SERVICES, INC.			1245305804	11/30/2008	11/30/2009
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	In-compliance	Five staff files were reviewed, all staff met the qualifications of the services being provided, had results of background screenings, CPR and 1st Aid certification, MANDT Certification, and documentation of participant specific training.	No	
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Commendation	The participant specific training form included all areas of Division requirements, was accurately completed and documented, and included additional training information when necessary.	No	
	Emergency Procedures during Transportation (CARF 1.E.)	In-compliance	Three vehicles were observed and all had emergency procedures during transportation.	No	
	Internal Inspections (CARF 1.E.)	In-compliance	Four locations were reviewed. All locations had documentation of emergency drills, with concerns identified when appropriate and follow-up to the concerns when appropriate.	No	
	External Inspections (CARF 1.E.)	In-compliance	Four locations were reviewed. All locations had documentation of current external inspections and identified concerns when appropriate. Four of the four (100%)contained follow-up of identified concerns.	No	
	Progress made on prior DDD Survey recommendations	In-compliance	All reccomendations from the previous DDD survey have been addressed.	No	
	Progress made on prior CARF Survey recommendations	Not Reviewed	Reccomendations were not reviewed due to CARF Survey being performed less than 30 days prior to DDD survey.	No	

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Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-compliance	The provider's policy on incident reporting was reviewed and met applicable standards.	No	
Complaint and Grievance (CARF 1.D.)	In-compliance	The provider's policy was reviewed and met applicable standards. The provider reports that there have been no formal complaints or grievances filed in the past year.	No	
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-compliance	The provider's policy on rights was reviewed and met applicable standards.	No	
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	Recommendation (Focused)	It was noted that there were three beds in a room at Day Habilitation that are utilized for personal care without a means for ensuring privacy between participants.	No	12/22/2008
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-compliance	5 of 5 staff (100%) interviewed were able to articulate functional knowledge of participant specific rights and restrictions.	No	
Behavior Plans (Chapter 45, Section 29)	In-compliance	Three Positive Behavior Support Plans were reviewed, and they met the applicable requirements.	No	
Restraint standards (Chapter 45, Section28)	In-compliance	The provider's policy on restraints was reviewed and met applicable standards; in addition, the provider has a process to assess restraint usage that met applicable standards.	No	
Transportation Requirements (CARF 1.E.9)	In-compliance	Three vehicles were observed and met applicable standards.	No	

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Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date Due	QIP
	Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	In-compliance	Four of four participant files were reviewed. Per the provider documentation and survey observation, all four plans of care were being implemented appropriately.	No		
	Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	Suggestion	Participant 2 was observed during employment services. It is suggested that the organization review the role of job coach with all supported employment job coaches to maximize participant success in the employment setting.	No		
	Releases of Information (CARF 2.B.)	In-compliance	In four of four files, releases of information were reviewed and the releases were found to be time limited, specific to what was being released, and to whom.	No		
	Emergency Information (CARF 2.B.)	In-compliance	Four files were reviewed and each file contained current emergency information which met applicable standards.	No		
	Objectives and goal tracking (Wyoming Medicaid Rules Chapter 41-43)	In-compliance	Four of four participant files reviewed consistently included documentation of tracking of progress made on objectives.	No		
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	In-compliance	Four of the four files reviewed contained billing and documentation which met applicable standards.	No		
Case Management Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date Due	QIP
	Case manager monthly/quarterly documentation meets requirements of Chapters 41, 42 and 43, and DD rule, Chapter 1	In-compliance	Four of four files were reviewed and contained documentation of team meeting minutes which met applicable standards.	No		

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	Team meeting notes (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-compliance	Four of four files reviewed contained documentation of the development and tracking of objectives which met applicable standards.	No		
	Development and Tracking of Objectives (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-compliance	Four of four files reviewed contained documentation of the development and tracking of objectives which met applicable standards.	No		
	Monitoring implementation of the IPC (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-compliance	Four of four files reviewed contained documentation of monitoring the implementation of the plan which met applicable standards.	No		
Residential Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date Due	QIP
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-compliance	Two homes were visited and both showed evidence of maintaining a healthy and safe environment.	No		
	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-compliance	Through observation of services, the provider is meeting applicable standards in this area.	No		
	The organization meets the standards in Chapter 45, section 23)	In-compliance	Through observation and review of provider documentation, the provider meets applicable standards in this area.	No		
Day Habilitiation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date Due	QIP
	The organization meets the standards for Community Integration (CARF 4.E)	In-compliance	The organization meets the standards as evidenced by documentation review, participant interviews, and service observation.	No		
	The organization meets the standards for employment (CARF Section 3 and Chapter 45 Section 23)	In-compliance	Except where otherwise noted in this report, the organization meets the standards as evidenced by documentation review, participant interviews, and service observation.	No		

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	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	In-compliance	Through documentation review, staff interview, and service observation it is determined that the organization maintains a healthy and safe environment.	No	
Other Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment (CARF 1.E.10 and WMR Chapter 45, Section 23)	In-compliance	Through documentation review and physical inspection of areas used for the delivery of respite services, it is determined that the organization maintains a safe and healthy environment.	No	
	Organization meets the standards for the service provided (CARF Standards and WMR Chapter 41-45)	In-compliance	Respite documentation was reviewed for one participant and it met applicable standards.	No	

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